



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

**\*BIBDATASHEET\*****CONFIRMATION NO. 5874**

Bib Data Sheet

|                             |                                       |              |                        |   |
|-----------------------------|---------------------------------------|--------------|------------------------|---|
| SERIAL NUMBER<br>09/662,203 | FILING DATE<br>09/14/2000<br><br>RULE | CLASS<br>128 | GROUP ART UNIT<br>3731 | ATTORNEY<br>DOCKET NO.<br>1171/38911/80 |
|-----------------------------|---------------------------------------|--------------|------------------------|---|

APPLICANTS

Nicholas Charles Alan Smith, Auckland, NEW ZEALAND;  
 Alastair Edwin McAuley, Auckland, NEW ZEALAND;

\*\* CONTINUING DATA \*\*\*\*\*  
*none*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 NEW ZEALAND 337993 09/23/1999  
*no*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 10/27/2000

|  |                                       |                        |                      |                            |
|--|---------------------------------------|------------------------|----------------------|----------------------------|
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Verified and Acknowledged<br><i>gma</i><br>Examiner's Signature Initials | STATE OR<br>COUNTRY<br>NEW<br>ZEALAND | SHEETS<br>DRAWING<br>4 | TOTAL<br>CLAIMS<br>9 | INDEPENDENT<br>CLAIMS<br>2 |
|--|---------------------------------------|------------------------|----------------------|----------------------------|

ADDRESS  
 Trexler Bushnell Giangiorgi & Blackstone LTD  
 105 W Adams St  
 Chicago , IL  
 60603

TITLE  
 Breathing assistance apparatus

|                                    |   |  |
|------------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>1260 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
|------------------------------------|---|--|